

**(FORM MUST BE FILLED OUT IN BLACK INK OR TYPED)**  
**CERTIFICATE OF BUSINESS NAME**  
**FOR LIMITED LIABILITY COMPANY (LLC)**

CERTIFICATE REQUIRED TO BE FILED BY A  
LIMITED LIABILITY COMPANY (LLC)  
CONDUCTING BUSINESS IN THE COMMONWEALTH OF VIRGINIA  
UNDER AN ASSUMED OR FICTITIOUS NAME

We hereby certify in accordance with the provisions of 59.1-69 of the 1950 Code of Virginia that we are conducting the business of

\_\_\_\_\_  
**(Type of business)**

at \_\_\_\_\_,  
**(Street Address) (City) (State and zip) (Phone #)**  
Loudoun County, Virginia under the name of:

\_\_\_\_\_  
**(Name of business)**

and that no other Limited Liability Company (LLC) has any interest of any kind in said business and that we are the sole owners and proprietor thereof and that our Post Office address is:

\_\_\_\_\_  
**(Street address) (City) (State and zip)**

Limited Liability Company Registered Agent's name is: \_\_\_\_\_

Registered Agent's address is: \_\_\_\_\_

We further certify that we were authorized to do business in the Commonwealth of Virginia on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

**(Note: To be used only for Foreign Limited Liability Companies)**

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Name of Limited Liability Company

By: \_\_\_\_\_

Title: \_\_\_\_\_

Commonwealth of Virginia

County of Loudoun, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that \_\_\_\_\_ whose name is signed to the foregoing and hereunto annexed Certificate dated the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, has this day personally appeared before me and acknowledged the same before me in my office.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

My Commission expires: \_\_\_\_\_

\_\_\_\_\_  
Deputy Clerk (Notary Public)